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BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 1687

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|---|---|--|------------------------|----------------------------------|----------------------------|
| SERIAL NUMBER 09/811,848 | FILING DATE 03/19/2001 | CLASS 713 | GROUP ART UNIT 2137 | ATTORNEY DOCKET NO. 655/64514 | |
| RULE | | | | | |
| APPLICANTS | | | | | |
| Doron Elgressy, Haifa, ISRAEL; Fabian Ben Aderet, Migdal Haemek, ISRAEL; | | | | | |
| ** CONTINUING DATA ***** <i>C07</i> This application is a CON of PCT/IL99/00539 10/13/1999 <i>C07</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>C07</i> ISRAEL 126587 10/15/1998 | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/26/2001 | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>C07</i> Examiner's Signature <i>C07</i> Initials | | STATE OR COUNTRY ISRAEL | SHEETS DRAWING 2 | TOTAL CLAIMS 32 | INDEPENDENT CLAIMS 5 |
| ADDRESS RICHARD F. JAWORSKI Cooper & Dunham LLP 1185 Avenue of the Americas New York , NY 10036 | | | | | |
| TITLE Method and system for the prevention of undesirable activities of executable objects | | | | | |
| | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) | | | |
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT | | | | |
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| SERIAL NUMBER 09/811,848 | FILING DATE 03/19/2001 RULE | CLASS 713 | GROUP ART UNIT 2131 | ATTORNEY DOCKET NO. 655/64514 |
|-----------------------------|-----------------------------------|--------------|------------------------|----------------------------------|

APPLICANTS

Doron Elgressy, Haifa, ISRAEL;
 Fabian Ben Aderet, Migdal Haemek, ISRAEL;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF PCT/IL99/00539 10/13/1999

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| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

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 New York , NY 10036

TITLE

Method and system for the prevention of undesirable activities of executable objects

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| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |